



Facility Rental Application

1. I, _____, representing _____,
 (Name of Individual) (Organization, if applicable)

request permission to RENT the following facility (check applicable boxes):

- | | |
|--|--|
| <input type="checkbox"/> Community Room HALF | <input type="checkbox"/> Movement Studio |
| <input type="checkbox"/> Community Room COMBINED | <input type="checkbox"/> Aquatics Area |
| <input type="checkbox"/> Climbing Wall | <input type="checkbox"/> Fitness Floor |
| <input type="checkbox"/> Gymnasium | <input type="checkbox"/> Entire Aquaplex Buy-Out |

Other Facilities / Areas: _____

Party Room: 30 person max capacity

- ☐ **Straight Party Room**
- ☐ Package
- ☐ Deluxe Package

Area (please choose one):

Climbing Wall Aquatics Area
 Gymnasium Fitness Floor

2. Date of Use: _____ Day of Week: _____

Time of Use (**INCLUDES SET-UP & CLEAN-UP TIME**): From _____ a.m. / p.m. to _____ a.m. / p.m.

3. The purpose of this use will be: _____
 (Meeting, Reception, Party, Fundraiser, etc.)

4. Anticipated attendance: ADULTS _____ YOUTHS (under 18) _____ TOTAL _____

5. What time will guests arrive? _____ What time will guests leave? _____

6. Are you a resident of (or does your organization exist within) the City of Flagstaff? _____

7. Is your organization a non-profit agency? _____

8. Is this event open to the public? _____

9. Will there be an admission charge, sale, solicitation, donation, or collection involved with your use? _____

10. Is the use of alcohol requested? _____

11. Equipment or services requested (contingent upon availability): # of chairs _____ # of tables _____ PA System _____

Other: _____

12. Will there be decorations? _____ If yes, explain: _____

13. Will there be amplified sound? _____ If yes, explain: _____

14. Will there be food at the event? _____ If yes, what type? _____

15. Will your use require the placing of signs, flyers or posters on City property? _____

16. Will other paid services be used [caterer, DJ, performer(s), speaker, etc.]? _____ If so, please explain: _____

Initial _____ In case of emergency or for reasons beyond the City's control, the City reserves the right to cancel the scheduled event prior to scheduled use without liability. Refunds will be made if cancellation by the City is necessary.

Initial _____ I understand that submittal of this application does not guarantee a reservation. Only after all documents have been received and all required payments made will a reservation be confirmed.

Initial _____ I have received, read and understand the information contained in the Flagstaff Aquaplex "Facility Rental Policies and Guidelines" packet.

It is distinctly understood and agreed that the applicant assumes all risks for loss, damage, liability, injury, cost or expense that may arise during, or be caused in any way by, such use or occupancy of the facilities of the City of Flagstaff and/or Recreation Section; the applicant further agrees that in consideration of being permitted to use the facilities, he/she will save and hold the said City of Flagstaff and/or their employees from any loss, claims, and liability or damages, and/or injuries to persons and property that in any way may be caused by applicant's use or occupancy.

I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant of any damage/loss sustained by the grounds, building, furniture or equipment or unusual clean-up occurring through the occupancy of said facilities by the applicant.

Date Completed Please Print Name Signature

Number and Street City State Zip Primary Phone Alternate Phone

Driver's License # E-mail

Name of Alternate Contact Person For Event Phone

Staff Name Printed Staff Signature Date

The Flagstaff Aquaplex currently accepts payment in the form of cash, Visa, Master Card, and checks made out to The City of Flagstaff.
No out-of-state personal checks will be accepted.